N22000004596

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SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:			
N22000004596			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub-	mitted for filing.		
Please return all correspondence concerning this matt	er to the following:		
Yeralin Martinez			
	(Name of Contact Per	son)	
Loving Bridges, Inc.			
, and the second	(Firm/ Company)		 .
3610 E. Fort King St.			
	(Address)		
Ocala, Florida 34470			
	(City/ State and Zip C	ode)	
support@lovingbridges.org			
E-mail address: (to be used	for future annual repo	ort notification	1)
For further information concerning this matter, please	call:		
Yeralin Martinez		919	885-3227
(Name of Contact Person		Area Code)	
Enclosed is a check for the following amount made pa	ayable to the Florida D	epartment of	State:
\$35 Filing Fee \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address	6a	at talalman	

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

FILED

MAT 211 -M & R

Loving Bridges, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State) N22000004596 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp," or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address; __. Florida ____ (Zip Code) (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer director holds more than one title, list the first letter of each office held, President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation. Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change. Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	PT V SV	John Doe Mike Jone Sally Smit						
Type of Action (Check One)	<u>Title</u>	<u>N</u>	<u>Same</u>		2dd 1	Address	allogs	
1) X Change Add	D	_	Sarah	Kassem	Elyaman		"Stays the	Same '
Remove								
2) Change Add		- -		<u> </u>	-			
Remove 3) Remove Add Remove								
4) Change Add			···					
Remove								
5) Change Add								
Remove								
6) Change Add								
E. If amending or addin (attach additional shee					:			
Article III- To prevent an	d end hor	melessness	amongst th	e persons of r	presumed benefits	by increasing t	he supply of	
affordable housing, provi	de shelter	r and other o	charitable p	purposes unde	er section 501(c)(3)	of the Interna	l Revenue Code or	
corresponding section of	any futur	e federal ta:	x code. Up	on dissolution	of this organization	on, assets shall	be distributed for one	
or more exempt purposes	under sec	ction 501(c)(3) of the	Internal Reve	nue Code, or corre	sponding section	on of any future	

federal tax code or shall be distributed to the federal government, or to a state or local government, for public purpose.

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The date of each amendment date this document was signed.	(s) adoption: May 13, 2022
Effective date if applicable:	May 13, 2022 (no more than 90 days after amendment file date)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date will not be listed as the ne Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the members and the number of votes east for the amendment(s)

harman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, or urt appointed fiduciary by that fiduciary)
been selected, by an incorporator – if in the hands of a receiver, trustee, or
been selected, by an incorporator – if in the hands of a receiver, trustee, or
been selected, by an incorporator – if in the hands of a receiver, trustee, or
lin Martinez
(Typed or printed name of person signing)
etor and Incorporator